Complete and sequel	nis form, together wit		- FEE(S) ee(s), to: <u>M</u>	Iail N	SMITTAL Mail Stop ISSUI Commissioner fo	E FEE		
JUN 0 6 2005 CO or Eax					P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000			
INSTRUCTIONS: This indicated fullers con indicated fullers considered to maintenance fee notification	m should be used for tran- respondence including the I elow or directed otherwise	smitting the ISSU Patent, advance ore in Block 1, by (a)	E FEE and l ders and noti) specifying a	PUBLICA fication of new cor	TION FEE (if requ f maintenance fees respondence address	uired). Blocks 1 through 5 will be mailed to the curren s; and/or (b) indicating a ser	should be completed whe it correspondence address parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE	E ADDRESS (Note: Use Block 1 for	any change of address)		F	ee(s) Transmittal. T aners. Each addition	f mailing can only be used his certificate cannot be used all paper, such as an assign te of mailing or transmission	for any other accompanying the formal drawing, mu	
20070	N & EVANS, LLP WER			i S a	hereby certify that that the Postal Service	ertificate of Mailing or Transhits Fee(s) Transmittal is bein with sufficient postage for full Stop ISSUE FEE addrespTO (703) 746-4000, on the	ng deposited with the Unit irst class mail in an envelo is above, or being facsim	
07/2005 YPOLITE2 00000	043 09757332			Į	Jane A. Walk	(er	(Depositor's nam	
FC:1501 FC:1504				June 3, 2005	Mur	· (Signatur		
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN		D INVENT	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/757,332 01/09/2001			Samuel I. Achilefo			MRD-66 .	5505	
TITLE OF INVENTION: H	YDROPHILIC CYANINE I	OYES						
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUI	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		- CT	\$300	\$1700 ¬	06/16/2005	
EXAMINER		ART UNIT			ASS-SUBCLASS	ل		
JONES, D	1616			424-009600		erron &		
CFR 1.363). Change of correspondence address (or Change of Correspondences form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cust Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	an assignee is identified by 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app T a substitute	ear on th for filing	type) e patent. If an assig an assignment. Y and STATE OR CO	gnee is identified below, the	document has been filed	
Mallinckrodt				•	Missouri			
					☐ Individual ☐	Corporation or other private g	group entity Governme	
4a. The following fee(s) are	enclosed:	41	Payment of		ount of the fee(s) is	enclosed		
13300 100					credit card. Form PTO-2038 is attached.			
Advance Order - # o	·	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, Deposit Account Number 23-3000 (enclose an extra copy of this form).						
5. Change in Entity Status a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.	☐ b. Applie	cant is no	longer claiming SM	ALL ENTITY status. See 37	CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and F interest as shown by the rec	is requested to apply the Iss bublication Fee (if required) ords of the United States Pat	ue Fee and Publica will not be accepte tent and Trademark	tion Fee (if and from anyon to Office.	ny) or to r e other th	e-apply any previou an the applicant; a re	sly paid issue fee to the appli gistered attorney or agent; or	the assignee or other party	
Authorized Signature	1	.hyma	n	-	Date	June 3, 2005		
Typed or printed name _					_	on No. 41,961		
						y the public which is to file (and 2 minutes to complete, included comments on the amount of the Trademark Office, U.S. Description of the Trademark Office,		